Bob Stone A Notification of Hazardous Waste Site This initial notification information is Please type or print in ink. If you need required by Section 103(c) of the Compreadditional space, use separate sheets of hensive Environmental Response, Compenpaper. Indicate the letter of the item sation, and Liability Act of 1980 and must which applies. MAY 26 1981 be mailed by June 9, 1981. 810526 1LS-000-001-249 Person Required to Notify: Enter the name and address of the person or organization required to notify. COMPONENTS В Site Location: Enter the common name (if known) and actual location of the site. 047021258 County Name (Last, First and Title) Enter the name, title (if applicable), and business telephone number of the person Phone to contact regarding information submitted on this form. D Dates of Waste Handling: Enter the years that you estimate waste treatment, storage, or disposal began and From (Year) To (Year) ended at the site. Waste Type: Choose the option you prefer to complete Option I: Select general waste types and source categories. If you do not know the general waste types or sources, you are encouraged to describe the site in Item I-Description of Site. regulations (40 CFR Part 261). Specific Type of Waste: General Type of Waste: Source of Waste: Place an X in the appropriate Place an X in the appropriate boxes. The categories listed boxes. overlap. Check each applicable category. located. 1. 
Organics 1. 
Mining 2. Inorganics 2. 

Construction FCOI 3. 

Solvents 3. 

Textiles

4. 

Fertilizer

5. ☐ Paper/Printing

6. ☐ Leather Tanning

7. | Iron/Steel Foundry

8. 

Chemical, General

9. 

Plating/Polishing

12. ☐ Transformers 13. Utility Companies 14. 
Sanitary/Refuse

15. 
Photofinish 16. ☐ Lab/Hospital

17. 
Unknown

18. ☐ Other (Specify)

10. ☐ Military/Ammunition

11. 

Electrical Conductors

Option 2: This option is available to persons familiar with the Resource Conservation and Recovery Act (RCRA) Section 3001

United States

Agency

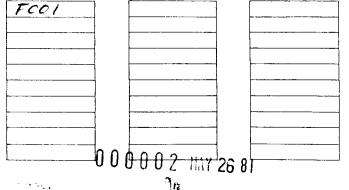
**Environmental Protection** 

Washington DC 20460

Zip Code 60101

Zip Code 6 0/0/

EPA has assigned a four-digit number to each hazardous waste listed in the regulations under Section 3001 of RCRA. Enter the appropriate four-digit number in the boxes provided. A copy of the list of hazardous wastes and codes can be obtained by contacting the EPA Region serving the State in which the site is



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APR 27 1981

WASTE MANAGEMENT BRANCH EPA. REGION V

E.P.A. — D.L.P.C. STATE OF ILLINOIS



9. 

Mixed Municipal Waste

Form Approved OMB No. 2000-0138 EPA Form 8900-1

Pesticides 5. 
Heavy metals

6. Acids

7. 

Bases

8. 
PCBs

10. Unknown

11. ☐ Other (Specify)

	Notification of Hazardous Waste Site	Side Two	. 7		
F	Waste Quantity:  Place an X in the appropriate boxes to indicate the facility types found at the site.	Facility Type  1. □ Piles 2. □ Land Treatment	Total Facility Waste Amount		
	In the "total facility waste amount" space give the estimated combined quantity (volume) of hazardous wastes at the site using cubic feet or gallons.  In the "total facility area" space, give the estimated area size which the facilities occupy using square feet or acres.	<ul> <li>3. □ Landfill</li> <li>4. □ Tanks</li> <li>5. □ Impoundment</li> <li>6. □ Underground Injection</li> <li>7. ☒ Drums, Above Ground</li> <li>8. □ Drums, Below Ground</li> <li>9. □ Other (Specify)</li> </ul>	Total Facility Area square feet 36,000 5 acres		
G	Known, Suspected or Likely Releases to the Environment:				
	Place an X in the appropriate boxes to indic or likely releases of wastes to the environm		☐ Known ☐ Suspected ☐ Likely 爲 None		
	Note: Items Hand I are optional. Completin hazardous waste sites. Although completing	ng these items will assist EPA and State ng the items is not required, you are en	e and local governments in locating and assessing acouraged to do so.		
Н	Sketch Map of Site Location: (Option	al)			
	Sketch a map showing streets, highways, routes or other prominent landmarks near the site. Place an X on the map to indicate the site location. Draw an arrow showing the direction north. You may substitute a publishing map showing the site location.				
Ī	Description of Site: (Optional)  Describe the history and present conditions of the site. Give directions to the site and describe any nearby wells, springs, lakes, or housing. Include such information as Irow waste was disposed and where the waste came from. Provide any other information or comments which may help describe the site conditions.				
J	Signature and Title:				
	The person or authorized representative (such as plant managers, superintendents, trustees or attorneys) of persons required to notify must sign the form and provide a mailing address (if different than address in item A). For other persons providing notification, the signature is optional. Check the boxes which best describe the relationship to the site of the person required to notify. If you are not required to notify check "Other".	Name Street	— □ Owner, Present □ Owner, Past □ Transporter		
		City State	☐ Operator, Present		
		Signature	Date		

## ENVIRONMENTAL PROTECTION AGENCY STATE OF ILLINOIS ROUTE SLIP

Office of	Super-
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Approval	Remarks
As requested	
Comment	
Confer	
For information	
For recommendation	
Investigate	
Necessary action	
Note and destroy	
Note and file	
Note and return	
Per conversation	
Prepare reply	
Signature	K 0 0
	<u> </u>



Illinois Environmental Protection Agency

Bob Stone U.S.E.P.A. - Region V 230 South Dearborn

Chicago, Illinois 60604